

## (Official Form 1) (10/05)

<b>FORM B1</b> <b>United States Bankruptcy Court</b> <b>Western District of Virginia</b>		<b>Voluntary Petition</b>																					
Name of Debtor (if individual, enter Last, First, Middle): <b>Humphries, Melvin NMN</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Humphries, Delmonica Lynn</b>																					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>Lynn Davis</b>																					
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>6285</b>		Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>2670</b>																					
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>4616 Fort Ave</b> <b>Unit A</b> <b>Lynchburg, VA</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>4616 Fort Ave</b> <b>Unit A</b> <b>Lynchburg, VA</b>																					
ZIPCODE <b>24502</b>		ZIPCODE <b>24502</b>																					
County of Residence or of the Principal Place of Business: <b>Lynchburg City</b>		County of Residence or of the Principal Place of Business: <b>Lynchburg City</b>																					
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):																					
ZIPCODE		ZIPCODE																					
Location of Principal Assets of Business Debtor (if different from street address above):																							
ZIPCODE																							
<b>Type of Debtor</b> (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and provide the information requested below.) State type of entity:		<b>Nature of Business</b> (Check all applicable boxes.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 15 U.S.C. § 501(c)(3)																					
		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input type="checkbox"/> Chapter 13																					
		<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business																					
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors:</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.																					
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY																					
<b>Estimated Number of Creditors</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">1-49</td> <td style="text-align: center;">50-99</td> <td style="text-align: center;">100-199</td> <td style="text-align: center;">200-999</td> <td style="text-align: center;">1,000-5,000</td> <td style="text-align: center;">5,001-10,000</td> <td style="text-align: center;">10,001-25,000</td> <td style="text-align: center;">25,001-50,000</td> <td style="text-align: center;">50,001-100,000</td> <td style="text-align: center;">Over 100,000</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>				1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(Official Form 1) (10/05)

FORM B1, Page 2

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Humphries, Melvin NMN &amp; Humphries, Delmonica Lynn</b>	
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: <b>None</b>		Case Number:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>		Date Filed:	
District:		Relationship:	
<div style="text-align: center;"><b>Exhibit A</b></div> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<div style="text-align: center;"><b>Exhibit B</b></div> (To be completed if debtor is an individual whose debts are primarily consumer debts)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  <div style="display: flex; justify-content: space-between;"> <span><b>X</b> <u>/s/ Margaret C. Valois</u> Signature of Attorney for Debtor(s)</span> <span><b>5/18/06</b> Date</span> </div>	
<div style="text-align: center;"><b>Exhibit C</b></div> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		<div style="text-align: center;"><b>Certification Concerning Debt Counseling by Individual/Joint Debtor(s)</b></div> <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition  <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)	
<div style="text-align: center;"><b>Information Regarding the Debtor (Check the Applicable Boxes)</b></div> <div style="text-align: center;">Venue (Check any applicable box)</div> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<div style="text-align: center;"><b>Statement by a Debtor Who Resides as a Tenant of Residential Property</b></div> <div style="text-align: center;">Check all applicable boxes.</div> <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="text-align: center;">_____ (Name of landlord or lessor that obtained judgment)</div>  <div style="text-align: center;">_____ (Address of landlord or lessor)</div>  <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			

(Official Form 1) (10/05)

FORM B1, Page 3

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

**Humphries, Melvin NMN & Humphries, Delmonica Lynn****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ Melvin NMN Humphries**

Signature of Debtor

**Melvin NMN Humphries****X /s/ Delmonica Lynn Humphries**

Signature of Joint Debtor

**Delmonica Lynn Humphries**

Telephone Number (If not represented by attorney)

**May 18, 2006**

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition. A certified copy of the order granting recognition is attached.

(Check one box only)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.

☐ Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

**X**

Printed Name of Foreign Representative

Date

**Signature of Attorney****X /s/ Margaret C. Valois**

Signature of Attorney for Debtor(s)

**Margaret C. Valois 66034**

Printed Name of Attorney for Debtor(s)

**Margaret C. Valois, PLLC**

Firm Name

**2511 Memorial Ave Ste 203**

Address

**Lynchburg, VA 24501-2657****(434) 845-4529**

Telephone Number

**May 18, 2006**

Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**X**

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*

**United States Bankruptcy Court  
Western District of Virginia**

**IN RE:**

Case No. \_\_\_\_\_

**Humphries, Melvin NMN & Humphries, Delmonica Lynn**Chapter **7**

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	\$ <b>0.00</b>		
B - Personal Property	<b>Yes</b>	<b>3</b>	\$ <b>10,030.66</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		\$ <b>7,708.00</b>	
E - Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>1</b>		\$ <b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>8</b>		\$ <b>40,551.82</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>2,102.04</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>2,099.66</b>
<b>TOTAL</b>		<b>19</b>	\$ <b>10,030.66</b>	\$ <b>48,259.82</b>	

United States Bankruptcy Court  
Western District of Virginia

IN RE:

Case No. \_\_\_\_\_

Humphries, Melvin NMN & Humphries, Delmonica Lynn

Chapter 7

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)**  
**[Individual Debtors Only]**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor was Intoxicated (from Schedule E)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
<b>TOTAL</b>	<b>0.00</b>



IN RE **Humphries, Melvin NMN & Humphries, Delmonica Lynn**

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		<b>Cash on hand</b>	<b>J</b>	<b>60.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	<b>X</b>			
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, include audio, video, and computer equipment.		<b>Bedroom Furniture- 2 bedrooms</b>	<b>J</b>	<b>300.00</b>
		<b>Dining Room Furniture</b>	<b>J</b>	<b>300.00</b>
		<b>Kitchen table &amp; chairs</b>	<b>J</b>	<b>75.00</b>
		<b>Living Room Furniture, Tables, Lamps</b>	<b>J</b>	<b>300.00</b>
		<b>Personal Computer- 10 years old</b>	<b>J</b>	<b>50.00</b>
		<b>Pots, dishes, small appliances and utensils</b>	<b>J</b>	<b>100.00</b>
		<b>Televisions (2), VCR, DVD player</b>	<b>J</b>	<b>300.00</b>
		<b>Washer &amp; Dryer</b>	<b>J</b>	<b>200.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>Books, pictures and home decor items</b>	<b>J</b>	<b>75.00</b>
6. Wearing apparel.		<b>Clothing- Husband</b>	<b>H</b>	<b>500.00</b>
		<b>Clothing- Wife</b>	<b>W</b>	<b>500.00</b>
7. Furs and jewelry.		<b>Jewelry and watch- Husband</b>	<b>H</b>	<b>75.00</b>
		<b>Jewelry and watch- Wife</b>	<b>W</b>	<b>150.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			
10. Annuities. Itemize and name each issue.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(3). 11 U.S.C. § 521(c); Rule 1007(b)).	<b>X</b>			

SCHEDULE B - PERSONAL PROPERTY

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	<b>X</b>	<b>Two shares Payless ShoeSource Inc</b>	<b>H</b>	<b>45.66</b>
13. Stock and interests in incorporated and unincorporated businesses. Itemize.				
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>	<b>1998 Mitsubishi Mirage 2001 Ford Focus.</b>	<b>W C</b>	<b>2,000.00 5,000.00</b>
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.				
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			

SCHEDULE B - PERSONAL PROPERTY



IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<b>TOTAL</b>				<b>10,030.66</b>

\_\_\_\_\_ **0** continuation sheets attached

**SCHEDULE B - PERSONAL PROPERTY**

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Cash on hand	CV § 34-4	60.00	60.00
Bedroom Furniture- 2 bedrooms	CV § 34-26(4a)	300.00	300.00
Dining Room Furniture	CV § 34-26(4a)	300.00	300.00
Kitchen table & chairs	CV § 34-26(4a)	75.00	75.00
Living Room Furniture, Tables, Lamps	CV § 34-26(4a)	300.00	300.00
Personal Computer- 10 years old	CV § 34-26(4a)	50.00	50.00
Pots, dishes, small appliances and utensils	CV § 34-26(4a)	100.00	100.00
Televisions (2), VCR, DVD player	CV § 34-26(4a)	300.00	300.00
Washer & Dryer	CV § 34-26(4a)	200.00	200.00
Books, pictures and home decor items	CV § 34-26(1)	75.00	75.00
Clothing- Husband	CV § 34-26(4)	500.00	500.00
Clothing- Wife	CV § 34-26(4)	500.00	500.00
Jewelry and watch- Husband	CV § 34-4	75.00	75.00
Jewelry and watch- Wife	CV § 34-4	150.00	150.00
Two shares Payless ShoeSource Inc	CV § 34-4	45.66	45.66
1998 Mitsubishi Mirage	CV § 34-26(8)	2,000.00	2,000.00

**IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn** Case No. \_\_\_\_\_  
Debtor(s)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL  UNSECURED PORTION, IF ANY
Account No. <b>0701</b> <b>CitiFinancial Auto</b> <b>2208 Highway 121</b> <b>Bedford, TX 76021-5981</b>	<b>X</b>	<b>C</b>	<b>Loan for 2001 Ford Focus</b>				<b>7,708.00</b>
			Value \$ <b>5,000.00</b>				<b>2,708.00</b>
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Subtotal (Total of this page)							<b>7,708.00</b>
(Use only on last page of the completed Schedule D) <b>TOTAL</b> (Report total also on Summary of Schedules)							<b>7,708.00</b>

0 continuation sheets attached

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "HWJC." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**  
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**  
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**  
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**  
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**  
Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**  
Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☐ **Taxes and Other Certain Debts Owed to Governmental Units**  
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**  
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**  
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

\_\_\_\_\_ 0 continuation sheets attached

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>5MSW</b> <b>Alltel Communications</b> <b>Building 4 Fifth Floor</b> <b>1 Allied Dr</b> <b>Little Rock, AR 72202-2013</b>		<b>H</b>	<b>Cellular Telephone Service</b>				<b>725.81</b>
Account No. <b>Alltel Communications</b> <b>PO Box 8130</b> <b>Little Rock, AR 72203-8130</b>			<b>Assignee or other notification for:</b> <b>Alltel Communications</b>				
Account No. <b>6285</b> <b>American General Finance</b> <b>220 John Glenn Dr</b> <b>Amherst, NY 14228-2228</b>		<b>J</b>	<b>Loan</b>				<b>3,732.00</b>
Account No. <b>4492</b> <b>Bank First</b> <b>1509 W 41st St</b> <b>Sioux Falls, SD 57105-6370</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>1,050.00</b>
Account No. <b>Jefferson Capital Systems LLC</b> <b>16 McLeland Rd</b> <b>Saint Cloud, MN 56303-2198</b>			<b>Assignee or other notification for:</b> <b>Bank First</b>				

7 continuation sheets attached

Subtotal  
(Total of this page) **5,507.81**

(Use only on last page of the completed Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Midland Credit Management</b> <b>PO Box 939019</b> <b>San Diego, CA 92193-9019</b>			<b>Assignee or other notification for:</b> <b>Bank First</b>				
Account No. <b>3540</b> <b>Capital One</b> <b>PO Box 85167</b> <b>Richmond, VA 23285-5167</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>1,068.75</b>
Account No. <b>Dominion Law Associates</b> <b>222 Central Park Ave</b> <b>Virginia Beach, VA 23462-3022</b>			<b>Assignee or other notification for:</b> <b>Capital One</b>				
Account No. <b>6285</b> <b>Check First</b> <b>3701 Fort Ave</b> <b>Lynchburg, VA 24501-3819</b>		<b>W</b>	<b>Loan</b>				<b>633.57</b>
Account No. <b>Check First</b> <b>117 Center Park Dr Ste 310</b> <b>Knoxville, TN 37922-2131</b>			<b>Assignee or other notification for:</b> <b>Check First</b>				
Account No. <b>0776</b> <b>Chevron Credit Bank NA</b> <b>PO Box 5010</b> <b>Concord, CA 94524-0010</b>		<b>H</b>	<b>Consumer Credit Account</b>				<b>661.00</b>
Account No. <b>Allied Interstate</b> <b>3000 Corporate Exchange Dr 5th Fl</b> <b>Columbus, OH 43231-7689</b>			<b>Assignee or other notification for:</b> <b>Chevron Credit Bank NA</b>				

Sheet no. 1 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **2,363.32**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>CCB Credit Services Inc</b> <b>PO Box 272</b> <b>Springfield, IL 62705-0272</b>			<b>Assignee or other notification for:</b> <b>Chevron Credit Bank NA</b>				
Account No. <b>3673</b> <b>Citi Cards</b> <b>Mc02-02-03</b> <b>8725 W Sahara Ave</b> <b>The Lakes, NV 89163-0001</b>		<b>H</b>	<b>Consumer Credit Account</b>				<b>900.00</b>
Account No. <b>LVNV Funding</b> <b>PO Box 10497</b> <b>Greenville, SC 29603-0497</b>			<b>Assignee or other notification for:</b> <b>Citi Cards</b>				
Account No. <b>3667</b> <b>Citibank</b> <b>ATTN: Bankruptcy</b> <b>PO Box 6500</b> <b>Sioux Falls, SD 57117-6500</b>		<b>J</b>	<b>Consumer Credit Account</b>				<b>2,000.00</b>
Account No. <b>Associated Recovery Systems</b> <b>201 W Grand Ave</b> <b>Escondido, CA 92025-2603</b>			<b>Assignee or other notification for:</b> <b>Citibank</b>				
Account No. <b>Glasser &amp; Glasser PLC</b> <b>580 E Main St Ste 600</b> <b>Norfolk, VA 23510-2322</b>			<b>Assignee or other notification for:</b> <b>Citibank</b>				
Account No. <b>Unifund CCR Partners</b> <b>10625 Techwood Cir</b> <b>Cincinnati, OH 45242-2846</b>			<b>Assignee or other notification for:</b> <b>Citibank</b>				

Sheet no. 2 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **2,900.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>3681</b> <b>Citibank/Sears</b> <b>ATTN: BANKRUPTCY</b> <b>PO Box 6189</b> <b>Sioux Falls, SD 57117-6189</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>1,000.00</b>
Account No. <b>LVNV Funding</b> <b>PO Box 10497</b> <b>Greenville, SC 29603-0497</b>			<b>Assignee or other notification for:</b> <b>Citibank/Sears</b>				
Account No. <b>1702</b> <b>Citibank/Sears</b> <b>ATTN: BANKRUPTCY</b> <b>PO Box 6189</b> <b>Sioux Falls, SD 57117-6189</b>		<b>H</b>	<b>Consumer Credit Account</b>				<b>7,110.00</b>
Account No. <b>LVNV Funding</b> <b>PO Box 10497</b> <b>Greenville, SC 29603-0497</b>			<b>Assignee or other notification for:</b> <b>Citibank/Sears</b>				
Account No. <b>0370</b> <b>Citibank/Shell</b> <b>PO Box 6003</b> <b>Hagerstown, MD 21747-6003</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>115.00</b>
Account No. <b>2922</b> <b>Creditors Service Agency</b> <b>2600 Memorial Ave Ste 206</b> <b>Lynchburg, VA 24501-2658</b>		<b>W</b>	<b>Collection Account for Medical treatment.</b> <b>ALL ACCOUNTS.</b>				<b>1,614.37</b>
Account No. <b>Centra Health</b> <b>PO Box 2496</b> <b>Lynchburg, VA 24505-2496</b>			<b>Assignee or other notification for:</b> <b>Creditors Service Agency</b>				

Sheet no. 3 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) **9,839.37**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)



IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Pathology Consultants Of Central VA</b> <b>1905 Atherholt Rd</b> <b>Lynchburg, VA 24501-1103</b>			<b>Assignee or other notification for:</b> <b>Creditors Service Agency</b>				
Account No. <b>Piedmont Eye Center Inc.</b> <b>2402 Atherholt Rd</b> <b>Lynchburg, VA 24501-2148</b>			<b>Assignee or other notification for:</b> <b>Creditors Service Agency</b>				
Account No. <b>Womens Health Services Of Central VA</b> <b>2919 Confederate Ave</b> <b>Lynchburg, VA 24501-2435</b>			<b>Assignee or other notification for:</b> <b>Creditors Service Agency</b>				
Account No. <b>1962</b> <b>Discover</b> <b>PO Box 15316</b> <b>Wilmington, DE 19850-5316</b>		<b>J</b>	<b>Consumer Credit Account.</b>				<b>4,240.63</b>
Account No. <b>Donald M. Fishman</b> <b>10605 Judicial Dr Ste A5</b> <b>Fairfax, VA 22030-5167</b>			<b>Assignee or other notification for:</b> <b>Discover</b>				
Account No. <b>Palisades Collection LLC</b> <b>210 Sylvan Ave</b> <b>Englewood Cliffs, NJ 07632-2524</b>			<b>Assignee or other notification for:</b> <b>Discover</b>				
Account No. <b>Wolpoff &amp; Abramson</b> <b>Two Irvington Centre</b> <b>702 King Farm Blvd</b> <b>Rockville, MD 20850-5774</b>			<b>Assignee or other notification for:</b> <b>Discover</b>				

Sheet no. 4 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **4,240.63**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>9963</b> <b>Discover</b> <b>PO Box 15316</b> <b>Wilmington, DE 19850-5316</b>		<b>H</b>	<b>Consumer Credit Account</b>				<b>9,000.00</b>
Account No. <b>Palisades Collection LLC</b> <b>210 Sylvan Ave</b> <b>Englewood Cliffs, NJ 07632-2524</b>			<b>Assignee or other notification for:</b> <b>Discover</b>				
Account No. <b>Unifund CCR Partners</b> <b>10625 Techwood Cir</b> <b>Cincinnati, OH 45242-2846</b>			<b>Assignee or other notification for:</b> <b>Discover</b>				
Account No. <b>8264</b> <b>First Premier Bank</b> <b>900 W Delaware St</b> <b>Sioux Falls, SD 57104-0347</b>		<b>H</b>	<b>Consumer Credit Account</b>				<b>420.00</b>
Account No. <b>First Premier Bank</b> <b>PO Box 5519</b> <b>Sioux Falls, SD 57117-5519</b>			<b>Assignee or other notification for:</b> <b>First Premier Bank</b>				
Account No. <b>6493</b> <b>Providian Bank</b> <b>ATTN: Bankruptcy</b> <b>PO Box 9180</b> <b>Pleasanton, CA 94566-9180</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>2,805.00</b>
Account No. <b>Alliance One</b> <b>PO Box 1961</b> <b>Southgate, MI 48195-0961</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				

Sheet no. 5 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **12,225.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Financial Recovery Services, Inc</b> <b>PO Box 813</b> <b>Concord, CA 94522-0813</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				
Account No. <b>LVNV Funding</b> <b>PO Box 10497</b> <b>Greenville, SC 29603-0497</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				
Account No. <b>Portfolio</b> <b>120 Corporate Blvd Ste 1</b> <b>Norfolk, VA 23502-4962</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				
Account No. <b>Thomas West Assoc LLC</b> <b>Dept 922</b> <b>PO Box 4115</b> <b>Concord, CA 94524-4115</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				
Account No. <b>1963</b> <b>Providian Bank</b> <b>ATTN: Bankruptcy</b> <b>4900 Johnson Dr</b> <b>Pleasanton, CA 94588-3308</b>		<b>W</b>	<b>Consumer Credit Account</b>				<b>3,000.00</b>
Account No. <b>Portfolio Recovery Assoc.</b> <b>PO Box 12914</b> <b>Norfolk, VA 23541-0914</b>			<b>Assignee or other notification for:</b> <b>Providian Bank</b>				
Account No. <b>5207</b> <b>Radiology Consultants Of Lynchburg</b> <b>113 Nationwide Dr</b> <b>Lynchburg, VA 24502-4272</b>		<b>W</b>	<b>Medical treatment. ALL ACCOUNTS.</b>				<b>90.00</b>

Sheet no. 6 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **3,090.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Creditors Service Agency</b> <b>2600 Memorial Ave Ste 206</b> <b>Lynchburg, VA 24501-2658</b>			<b>Assignee or other notification for:</b> <b>Radiology Consultants Of Lynchburg</b>				
Account No. <b>3431</b> <b>SCA Credit Services</b> <b>1502 Williamson Rd NE</b> <b>Roanoke, VA 24012-5130</b>		<b>W</b>	<b>Collection Account for Medical Treatment</b> <b>from Centra Health. ALL ACCOUNTS.</b>				<b>385.69</b>
Account No.							
Account No.							
Account No.							
Account No.							
Account No.							
Account No.							

Sheet no. <u>7</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	Subtotal (Total of this page)	<b>385.69</b>
(Complete only on last sheet of Schedule F) <b>TOTAL</b>		<b>40,551.82</b>
	(Report total also on Summary of Schedules)	



**IN RE** Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)

### SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Lyndale Humphries</b> <b>4616 Fort Ave</b> <b>Lynchburg, VA 24502-5036</b>	<b>CitiFinancial Auto</b> <b>2208 Highway 121</b> <b>Bedford, TX 76021-5981</b>

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE
EMPLOYMENT: DEBTOR SPOUSE		
Occupation <b>Sales</b> Name of Employer <b>Famous Men's Clothing</b> How long employed <b>3 Years</b> Address of Employer <b>Lynchburg, VA</b>	<b>Cook</b> <b>Canteen Restaurant</b> <b>9 Months</b> <b>Odd Fellows Road</b> <b>Lynchburg, VA</b>	

**INCOME:** (Estimate of average monthly income)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ <u>1,118.00</u>	\$ <u>1,385.87</u>
2. Estimated monthly overtime	\$ _____	\$ _____
<b>3. SUBTOTAL</b>	<b>\$ <u>1,118.00</u></b>	<b>\$ <u>1,385.87</u></b>
<b>4. LESS PAYROLL DEDUCTIONS</b>		
a. Payroll taxes and Social Security	\$ _____	\$ <u>401.83</u>
b. Insurance	\$ _____	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify) _____	\$ _____	\$ _____
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>401.83</u></b>
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ <u>1,118.00</u></b>	<b>\$ <u>984.04</u></b>
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) _____	\$ _____	\$ _____
<b>14. SUBTOTAL OF INCOME REPORTED ON LINES 7 THROUGH 13</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b>15. TOTAL MONTHLY INCOME</b> (Add amounts shown on Lines 6 through 14.)	<b>\$ <u>1,118.00</u></b>	<b>\$ <u>984.04</u></b>
<b>16. TOTAL COMBINED MONTHLY INCOME</b> \$ <u>2,102.04</u> (Report also on Summary of Schedules)		

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>525.00</u>
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ <u>75.00</u>
b. Water and sewer	\$ _____
c. Telephone	\$ <u>70.00</u>
d. Other <b>Garbage</b>	\$ <u>10.00</u>
3. Home maintenance (repairs and upkeep)	\$ <u>25.00</u>
4. Food	\$ <u>350.00</u>
5. Clothing	\$ <u>50.00</u>
6. Laundry and dry cleaning	\$ <u>65.00</u>
7. Medical and dental expenses	\$ <u>75.00</u>
8. Transportation (not including car payments)	\$ <u>250.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>25.00</u>
10. Charitable contributions	\$ _____
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ _____
b. Life	\$ _____
c. Health	\$ _____
d. Auto	\$ <u>100.00</u>
e. Other _____	\$ _____
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) <b>Personal Property Tax</b>	\$ <u>16.66</u>
13. Installment payments (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ <u>263.00</u>
b. Other _____	\$ _____
c. Other _____	\$ _____
14. Alimony, maintenance, and support paid to others	\$ _____
15. Payments for support of additional dependents not living at your home	\$ _____
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ _____
17. Other <b>Allowance To College-Age Daughter</b>	\$ <u>200.00</u>
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$ <u><u>2,099.66</u></u>

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:  
**Student loans for daughter's education become due. Debtors are joint debtors on these loans. Payment will be \_\_\_\_\_ per month.**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Total monthly income from Line 16 of Schedule I	\$ <u>2,102.04</u>
b. Total monthly expenses from Line 18 above	\$ <u>2,099.66</u>
c. Monthly net income (a. minus b.)	\$ <u>2.38</u>



IN RE Humphries, Melvin NMN & Humphries, Delmonica Lynn Case No. \_\_\_\_\_  
Debtor(s)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ **20** sheets, and that  
(Total shown on summary page plus 1)  
they are true and correct to the best of my knowledge, information, and belief.

Date: May 18, 2006 Signature: /s/ Melvin NMN Humphries  
**Melvin NMN Humphries** Debtor

Date: May 18, 2006 Signature: /s/ Delmonica Lynn Humphries  
**Delmonica Lynn Humphries** (Joint Debtor, if any)  
[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer \_\_\_\_\_ Social Security No. (Required by 11 U.S.C. § 110.)  
*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

\_\_\_\_\_  
Address

Signature of Bankruptcy Petition Preparer \_\_\_\_\_ Date \_\_\_\_\_

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_  
(corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.  
(Total shown on summary page plus 1)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

**Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.**

UNITED STATES BANKRUPTCY COURT

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE

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In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

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**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**Humphries, Melvin NMN & Humphries, Delmonica Lynn**  
Printed Name(s) of Debtor(s)

**X /s/ Melvin NMN Humphries**  
Signature of Debtor

**5/18/2006**  
Date

Case No. (if known) \_\_\_\_\_

**X /s/ Delmonica Lynn Humphries**  
Signature of Joint Debtor (if any)

**5/18/2006**  
Date

**United States Bankruptcy Court  
Western District of Virginia**

IN RE:

Case No. \_\_\_\_\_

Humphries, Melvin NMN &amp; Humphries, Delmonica Lynn

Chapter **7**

Debtor(s)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

- ☐ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.  
☒ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.  
☒ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
<b>2001 Ford Focus.</b>	<b>CitiFinancial Auto</b>				✓

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)
<b>Month to Month Lease/ \$525.00 Per Month</b>	<b>F&amp;S Rentals</b>	✓
<b>Month to Month Lease for Storage Unit/ \$27.00 Per Month</b>	<b>AAAA Self Storage</b>	✓

**05/18/2006****/s/ Melvin NMN Humphries****/s/ Delmonica Lynn Humphries**

Date

**Melvin NMN Humphries**

Debtor

**Delmonica Lynn Humphries**

Joint Debtor (if applicable)

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

\_\_\_\_\_  
 Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
 Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
 Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**United States Bankruptcy Court  
Western District of Virginia**

IN RE:

Case No. \_\_\_\_\_

**Humphries, Melvin NMN & Humphries, Delmonica Lynn**Chapter **7**

Debtor(s)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

☐ None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>5,000.00</b>	<b>2006 Employment Husband</b>
<b>5,913.91</b>	<b>2006 Employment Wife</b>
<b>10,341.00</b>	<b>2005 Employment Husband</b>
<b>4,734.64</b>	<b>2005 Employment Wife</b>

**2. Income other than from employment or operation of business**

☐ None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>6,000.00</b>	<b>2004 Unemployment Husband</b>
<b>4,000.00</b>	<b>2004 Unemployment Wife</b>

**3. Payments to creditors***Complete a. or b., as appropriate, and c.*

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>Portfolio Recovery Associates LLC v. Delmonica Humphries Case No. 05-7930</b>	<b>Warrant in Debt</b>	<b>Lynchburg General District Court</b>	<b>Default Judgment 12/14/05</b>
<b>Palisades Collection, LLC t/a Discover Bank v. Delmonica L. Humphries Case No. 04-2798-01</b>	<b>Garnishment</b>	<b>Lynchburg General District Court</b>	<b>Other. 8/11/05</b>
<b>Unifund CCR Partners v. Delmonical D. Humphries Case No. 06-2671</b>	<b>Warrant in Debt</b>	<b>Lynchburg General District Court</b>	<b>Hearing 5/15/06</b>

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**5. Repossessions, foreclosures and returns**

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**6. Assignments and receiverships**

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**7. Gifts**

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**9. Payments related to debt counseling or bankruptcy**

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>Margaret C. Valois, PLLC</b> <b>2511 Memorial Ave Ste 203</b> <b>Lynchburg, VA 24501-2657</b>	<b>4/11/2006</b>	<b>695.00</b>

**10. Other transfers**

- None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
<b>Adrian Dunkirk</b> <b>Lynchburg, VA</b> <b>SISTER</b>	<b>1/04</b>	<b>1987 Honda Civic. No value received.</b>

**Vehicle currently worth approximately \$900.00. Transferee has returned vehicle to Debtors, who have not yet retitled vehicle in their own names.**

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

- None ☒ List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

- None ☐ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

- None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

- None ☒ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



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*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **May 18, 2006** Signature /s/ Melvin NMN Humphries  
of Debtor **Melvin NMN Humphries**

Date: **May 18, 2006** Signature /s/ Delmonica Lynn Humphries  
of Joint Debtor **Delmonica Lynn Humphries**  
(if any)

0 continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

United States Bankruptcy Court  
Western District of Virginia

IN RE:

Case No. \_\_\_\_\_

Humphries, Melvin NMN & Humphries, Delmonica Lynn

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: May 18, 2006

Signature: /s/ Melvin NMN Humphries  
**Melvin NMN Humphries**

Debtor

Date: May 18, 2006

Signature: /s/ Delmonica Lynn Humphries  
**Delmonica Lynn Humphries**

Joint Debtor, if any

AAAA SELF STORAGE  
1607 E WASHINGTON ST  
PETERSBURG, VA 23803-3630

ALLIANCE ONE  
PO BOX 1961  
SOUTHGATE, MI 48195-0961

ALLIED INTERSTATE  
3000 CORPORATE EXCHANGE DR 5TH FL  
COLUMBUS, OH 43231-7689

ALLTEL COMMUNICATIONS  
BUILDING 4 FIFTH FLOOR  
1 ALLIED DR  
LITTLE ROCK, AR 72202-2013

ALLTEL COMMUNICATIONS  
PO BOX 8130  
LITTLE ROCK, AR 72203-8130

AMERICAN GENERAL FINANCE  
220 JOHN GLENN DR  
AMHERST, NY 14228-2228

ASSOCIATED RECOVERY SYSTEMS  
201 W GRAND AVE  
ESCONDIDO, CA 92025-2603

BANK FIRST  
1509 W 41ST ST  
SIOUX FALLS, SD 57105-6370

CAPITAL ONE  
PO BOX 85167  
RICHMOND, VA 23285-5167

CCB CREDIT SERVICES INC  
PO BOX 272  
SPRINGFIELD, IL 62705-0272

CENTRA HEALTH  
PO BOX 2496  
LYNCHBURG, VA 24505-2496

CHECK FIRST  
3701 FORT AVE  
LYNCHBURG, VA 24501-3819

CHECK FIRST  
117 CENTER PARK DR STE 310  
KNOXVILLE, TN 37922-2131

CHEVRON CREDIT BANK NA  
PO BOX 5010  
CONCORD, CA 94524-0010

CITI CARDS  
MC02-02-03  
8725 W SAHARA AVE  
THE LAKES, NV 89163-0001

CITIBANK  
ATTN: BANKRUPTCY  
PO BOX 6500  
SIOUX FALLS, SD 57117-6500

CITIBANK/SEARS  
ATTN: BANKRUPTCY  
PO BOX 6189  
SIOUX FALLS, SD 57117-6189

CITIBANK/SHELL  
PO BOX 6003  
HAGERSTOWN, MD 21747-6003

CITIFINANCIAL AUTO  
2208 HIGHWAY 121  
BEDFORD, TX 76021-5981

CREDITORS SERVICE AGENCY  
2600 MEMORIAL AVE STE 206  
LYNCHBURG, VA 24501-2658

DISCOVER  
PO BOX 15316  
WILMINGTON, DE 19850-5316

DOMINION LAW ASSOCIATES  
222 CENTRAL PARK AVE  
VIRGINIA BEACH, VA 23462-3022

DONALD M. FISHMAN  
10605 JUDICIAL DR STE A5  
FAIRFAX, VA 22030-5167

F&S RENTALS  
C/O SHEILA FOSTER  
171 MOULTRIE ST MSC15L  
CHARLESTON, SC 29409-0001

FINANCIAL RECOVERY SERVICES, INC  
PO BOX 813  
CONCORD, CA 94522-0813

FIRST PREMIER BANK  
900 W DELAWARE ST  
SIOUX FALLS, SD 57104-0347

FIRST PREMIER BANK  
PO BOX 5519  
SIOUX FALLS, SD 57117-5519

GLASSER & GLASSER PLC  
580 E MAIN ST STE 600  
NORFOLK, VA 23510-2322

JEFFERSON CAPITAL SYSTEMS LLC  
16 MCLELAND RD  
SAINT CLOUD, MN 56303-2198

LVNV FUNDING  
PO BOX 10497  
GREENVILLE, SC 29603-0497

MIDLAND CREDIT MANAGEMENT  
PO BOX 939019  
SAN DIEGO, CA 92193-9019

OFFICE OF THE US TRUSTEE  
WESTERN DISTRICT OF VIRGINIA  
210 1ST ST SW STE 505  
ROANOKE, VA 24011-1620

PALISADES COLLECTION LLC  
210 SYLVAN AVE  
ENGLEWOOD CLIFFS, NJ 07632-2524

PATHOLOGY CONSULTANTS OF CENTRAL VA  
1905 ATHERHOLT RD  
LYNCHBURG, VA 24501-1103

PIEDMONT EYE CENTER INC.  
2402 ATHERHOLT RD  
LYNCHBURG, VA 24501-2148

PORTFOLIO  
120 CORPORATE BLVD STE 1  
NORFOLK, VA 23502-4962

PORTFOLIO RECOVERY ASSOC.  
PO BOX 12914  
NORFOLK, VA 23541-0914

PROVIDIAN BANK  
ATTN: BANKRUPTCY  
PO BOX 9180  
PLEASANTON, CA 94566-9180

PROVIDIAN BANK  
ATTN: BANKRUPTCY  
4900 JOHNSON DR  
PLEASANTON, CA 94588-3308

RADIOLOGY CONSULTANTS OF LYNCHBURG  
113 NATIONWIDE DR  
LYNCHBURG, VA 24502-4272

SCA CREDIT SERVICES  
1502 WILLIAMSON RD NE  
ROANOKE, VA 24012-5130

THOMAS WEST ASSOC LLC  
DEPT 922  
PO BOX 4115  
CONCORD, CA 94524-4115

UNIFUND CCR PARTNERS  
10625 TECHWOOD CIR  
CINCINNATI, OH 45242-2846

WOLPOFF & ABRAMSON  
TWO IRVINGTON CENTRE  
702 KING FARM BLVD  
ROCKVILLE, MD 20850-5774

WOMENS HEALTH SERVICES OF CENTRAL VA  
2919 CONFEDERATE AVE  
LYNCHBURG, VA 24501-2435



United States Bankruptcy Court  
Western District of Virginia

IN RE:

Case No. \_\_\_\_\_

Humphries, Melvin NMN & Humphries, Delmonica Lynn

Chapter 7

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **695.00**

Prior to the filing of this statement I have received ..... \$ **695.00**

Balance Due ..... \$ **0.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☐ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

**Representation at Adversarial Proceedings**  
**Amendments to Petition**  
**Actions to Avoid Judicial Liens**  
**Actions to Correct Erroneous Credit Reports**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 18, 2006

Date

/s/ Margaret C. Valois

Signature of Attorney

Margaret C. Valois, PLLC

Name of Law Firm

## Form B22A (Chapter 7) (10/05)

In re: Humphries, Melvin NMN & Humphries, Delmonica Lynn

Debtor(s)

Case Number: \_\_\_\_\_  
(If known)

According to the calculations required by this statement:

☐ The presumption arises☒ The presumption does not arise

(Check the box as directed in Parts I, III, and VI of this statement.)

**STATEMENT OF CURRENT MONTHLY INCOME AND MEANS TEST CALCULATION**  
FOR USE IN CHAPTER 7

In addition to Schedules I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

**Part I. EXCLUSION FOR DISABLED VETERANS**

1

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the "Presumption does not arise" box at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Veteran's Declaration.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION****Marital/filing status.** Check the box that applies and complete the balance of this part of this statement as directed.a. ☐ Unmarried. **Complete only Column A ("Debtor's Income") for Lines 3-11.**b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." **Complete only Column A ("Debtor's Income") for Lines 3-11.**c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**d. ☒ Married, filing jointly. **Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.**

All figures must reflect average monthly income for the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If you received different amounts of income during these six months, you must total the amounts received during the six months, divide this total by six, and enter the result on the appropriate line.

**Column A**  
**Debtor's**  
**Income****Column B**  
**Spouse's**  
**Income**

3

**Gross wages, salary, tips, bonuses, overtime, commissions.**

\$ 1,316.67

\$ 384.93

4

**Income from the operation of a business, profession, or farm.** Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. **Do not include any part of the business expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$
b.	Ordinary and necessary business expenses	\$
c.	Business income	Subtract Line b from Line a

\$

\$

5

**Rent and other real property income.** Subtract Line b from Line a and enter the difference on Line 5. Do not enter a number less than zero. **Do not include any part of the operating expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$
b.	Ordinary and necessary operating expenses	\$
c.	Rental income	Subtract Line b from Line a

\$

\$

6

**Interest, dividends, and royalties.**

\$

\$

7

**Pension and retirement income.**

\$

\$

8

**Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support.** Do not include contributions from the debtor's spouse if Column B is completed.

\$

\$

9

**Unemployment compensation.** Enter the amount in Column A and, if applicable, Column B. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:

Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____
---	-----------------	-----------------

\$

\$

10	<b>Income from all other sources.</b> If necessary, list additional sources on a separate page. <b>Do not include</b> any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount.			
	a.		\$	
	b.		\$	
	Total and enter on Line 10		\$	\$
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		\$ 1,316.67	\$ 384.93
12	<b>Total current monthly income.</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		\$ 1,701.60	

### Part III. APPLICATION OF § 707(B)(7) EXCLUSION

13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.		\$ 20,419.20
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <b>Virginia</b> b. Enter debtor's household size: <b>2</b>		\$ 56,455.00
15	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. <input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

### Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

16	<b>Enter the amount from Line 12.</b>	\$
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT regularly contributed to the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$
18	<b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.	\$

### Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)

#### Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

19	<b>National Standards: food, clothing, household supplies, personal care, and miscellaneous.</b> Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		\$									
20A	<b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).		\$									
20B	<b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%;"> <tr> <td>a.</td> <td>IRS Housing and Utilities Standards; mortgage/rental expense</td> <td>\$</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td>Subtract Line b from Line a</td> </tr> </table>		a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$										
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$										
c.	Net mortgage/rental expense	Subtract Line b from Line a										
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		\$									

22	<p><b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.</p> <p><input type="checkbox"/> 0   <input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>Enter the amount from IRS Transportation Standards, Operating Costs &amp; Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$									
23	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;">IRS Transportation Standards, Ownership Costs, First Car</td> <td style="width: 35%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, First Car	\$	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$
a.	IRS Transportation Standards, Ownership Costs, First Car	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a									
24	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;">IRS Transportation Standards, Ownership Costs, Second Car</td> <td style="width: 35%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$
a.	IRS Transportation Standards, Ownership Costs, Second Car	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a									
25	<p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b></p>	\$									
26	<p><b>Other Necessary Expenses: mandatory payroll deductions.</b> Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</b></p>	\$									
27	<p><b>Other Necessary Expenses: life insurance.</b> Enter average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b></p>	\$									
28	<p><b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. <b>Do not include payments on past due support obligations included in Line 44.</b></p>	\$									
29	<p><b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged depend-ent child for whom no public education providing similar services is available.</p>	\$									
30	<p><b>Other Necessary Expenses: childcare.</b> Enter the average monthly amount that you actually expend on childcare. <b>Do not include payments made for children's education.</b></p>	\$									
31	<p><b>Other Necessary Expenses: health care.</b> Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. <b>Do not include payments for health insurance listed in Line 34.</b></p>	\$									
32	<p><b>Other Necessary Expenses: telecommunication services.</b> Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance, or internet services necessary for the health and welfare of you or your dependents. <b>Do not include any amount previously deducted.</b></p>	\$									
33	<p><b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.</p>	\$									

**Subpart B: Additional Expense Deductions under § 707(b)**  
**Note: Do not include any expenses that you have listed in Lines 19-32**

34	<b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the average monthly amounts that you actually expend in each of the following categories and enter the total.			
	a.	Health Insurance	\$	
	b.	Disability Insurance	\$	
	c.	Health Savings Account	\$	
		Total: Add Lines a, b and c		\$
35	<b>Continued contributions to the care of household or family members.</b> Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.			\$
36	<b>Protection against family violence.</b> Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law.			\$
37	<b>Home energy costs in excess of the allowance specified by the IRS Local Standards.</b> Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. <b>You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.</b>			\$
38	<b>Education expenses for dependent children less than 18.</b> Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b>			\$
39	<b>Additional food and clothing expense.</b> Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.</b>			\$
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).			\$
41	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40			\$
<b>Subpart C: Deductions for Debt Payment</b>				
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.			
		Name of Creditor	Property Securing the Debt	60-month Average Pmt
	a.			\$
	b.			\$
	c.			\$
		Total: Add lines a, b and c.		\$
43	<b>Past due payments on secured claims.</b> If any of the debts listed in Line 42 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.			
		Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount
	a.			\$
	b.			\$
	c.			\$
		Total: Add lines a, b and c.		\$
44	<b>Payments on priority claims.</b> Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.			\$

45	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.		
	a. Projected average monthly Chapter 13 plan payment.	\$	
	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	X	
	c. Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.		\$
<b>Subpart D: Total Deductions Allowed under § 707(b)(2)</b>			
47	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.		\$

### Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION

48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$
50	<b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result.	\$
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.	\$
52	<b>Initial presumption determination.</b> Check the applicable box and proceed as directed. <div style="margin-top: 5px;"> <input type="checkbox"/> <b>The amount on Line 51 is less than \$6,000.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.         </div> <div style="margin-top: 5px;"> <input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$10,000.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.         </div> <div style="margin-top: 5px;"> <input type="checkbox"/> <b>The amount on Line 51 is at least \$6,000, but not more than \$10,000.</b> Complete the remainder of Part VI (Lines 53 through 55).         </div>	
53	<b>Enter the amount of your non-priority unsecured debt.</b>	\$
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$
55	<b>Secondary presumption determination.</b> Check the applicable box and proceed as directed. <div style="margin-top: 5px;"> <input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.         </div> <div style="margin-top: 5px;"> <input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.         </div>	

### Part VII. ADDITIONAL EXPENSE CLAIMS

56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.		
	Expense Description		Monthly Amount
	a.		\$
	b.		\$
	c.		\$
	Total: Add Lines a, b and c		\$

### Part VIII. VERIFICATION

57	I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i>	
	Date: <b>May 18, 2006</b>	Signature: <u>/s/ Melvin NMN Humphries</u> <div style="text-align: right; font-size: small;">(Debtor)</div>
	Date: <b>May 18, 2006</b>	Signature: <u>/s/ Delmonica Lynn Humphries</u> <div style="text-align: right; font-size: small;">(Joint Debtor, if any)</div>